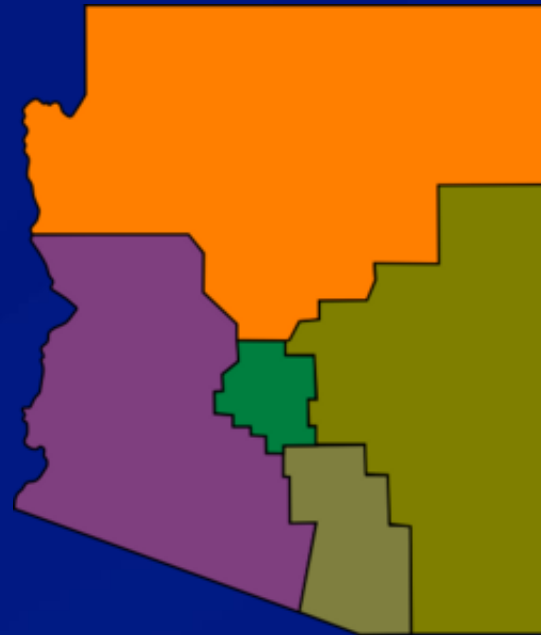


Arizona New Perspectives in Tobacco Control



Karla S. Sneegas, MPH

Program Services Branch Chief
Office on Smoking and Health

Centers for Disease Control and Prevention

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Phoenix, AZ

CIGARETTE **SMOKING** OVERALL AMONG **ADULTS** IN THE U.S. IS **DOWN**.

YET CIGARETTE SMOKING REMAINS HIGH AMONG CERTAIN POPULATIONS.



LOW
EDUCATION



MALES



YOUNG
ADULTS



SOUTH AND
MIDWEST



LESBIANS,
GAYS, AND
BISEXUALS



BELOW
POVERTY
LEVEL



DISABLED



CERTAIN
RACES/
ETHNICITIES

WE CAN PUT AN END TO TOBACCO USE.



IMPLEMENT
SMOKE FREE
LAWS



RAISE
TOBACCO
PRICES

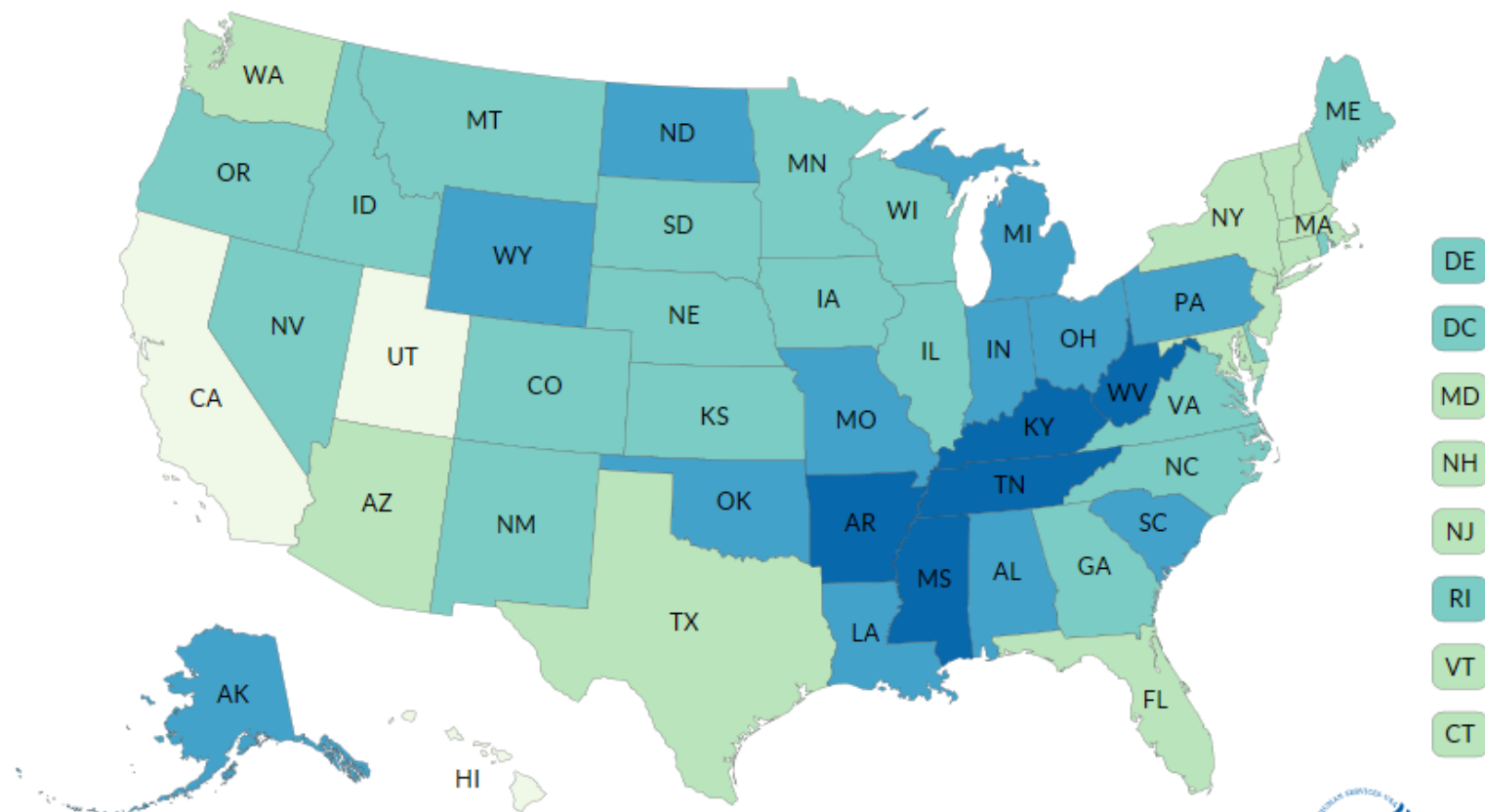


INCREASE FUNDING
FOR TOBACCO
CONTROL PROGRAMS



Centers for Disease
Control and Prevention
National Center for Chronic
Disease Prevention and
Health Promotion

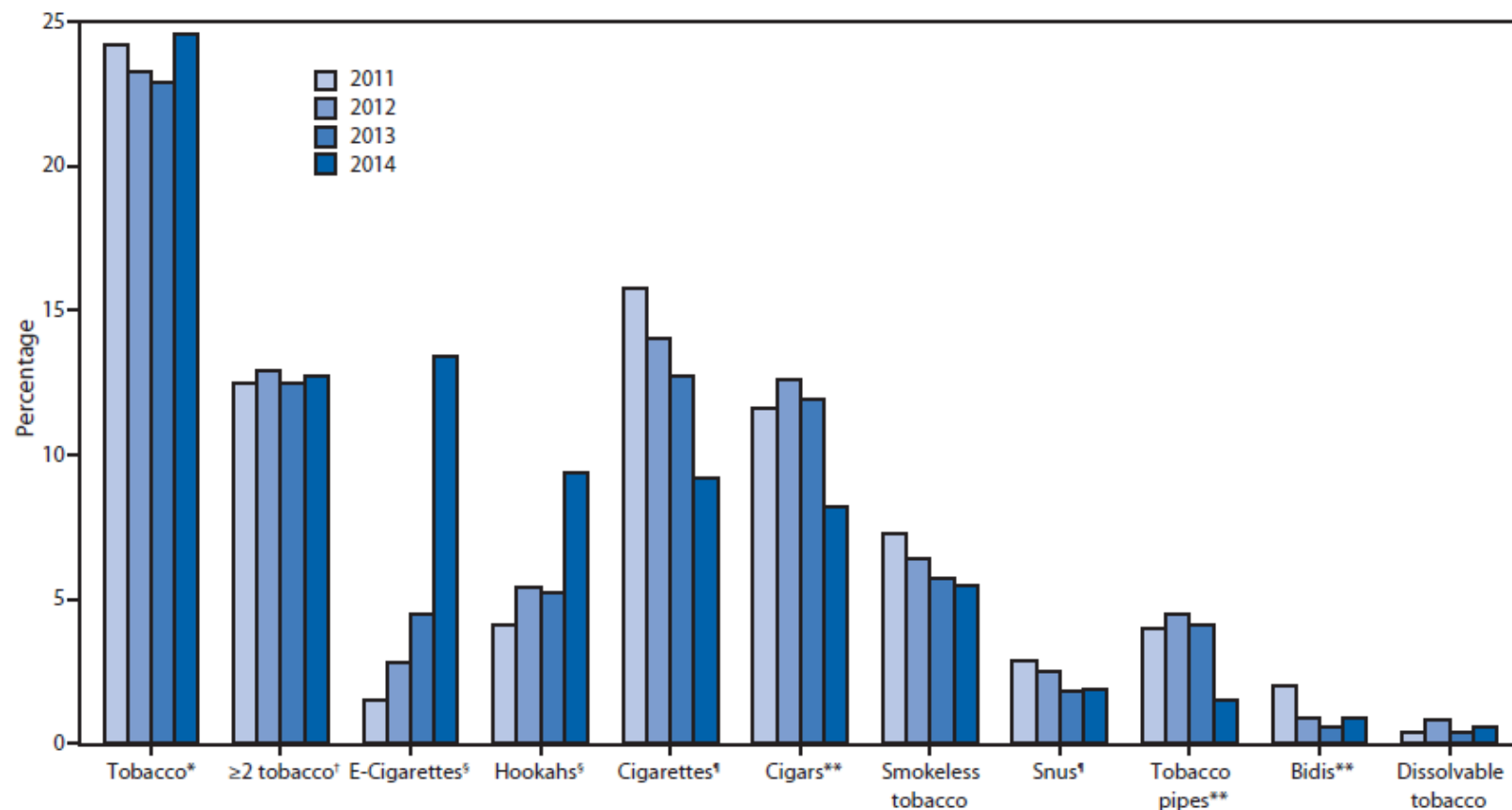
Current Cigarette Use Among Adults (Behavior Risk Factor Surveillance System) 2013



Trends in Quit Attempts Among Adult Cigarette Smokers- United States, 2001-2013

- ❑ ARIZONA (2001-2010) Proportion of adult cigarette smokers who made a quit attempt in the past year increased significantly from 57.1% to 57.5%**
- ❑ ARIZONA (2011-2013) Proportion of adult cigarette smokers who made a quit attempt in the past year increased from 64.3% to 67.3%**
- ❑ NATIONAL median for 2011-2013 was 64.59 (2011), 66.0% (2012), and 65.9% (2013)**

FIGURE 1. Estimated percentage of high school students who used tobacco in the preceding 30 days, by tobacco product — National Youth Tobacco Survey, United States, 2011–2014



* Defined as preceding 30-day use of cigarettes, cigars, smokeless tobacco, e-cigarettes, hookahs, tobacco pipes, snus, dissolvable tobacco, and/or bidis.

† Defined as preceding 30-day use of two or more of cigarettes, cigars, smokeless tobacco, e-cigarettes, hookahs, tobacco pipes, snus, dissolvable tobacco, and/or bidis.

‡ Linear decrease ($p < 0.05$).

§ Nonlinear increase ($p < 0.05$).

** Nonlinear decrease ($p < 0.05$).

Projected number of 0–17 year-olds who will become smokers and die prematurely as adults because of a smoking-related illness, by state—United States, 2012

State Prevalence of current smoking, ages 18-30		Projected number of smokers ages 0–17	Projected number of deaths 0–17 years of age
AZ	22.2%	359,800	115,000
CA	14.9%	1,376,800	441,000
NM	24.2%	124,500	40,000
CO	23.0%	120,800	91,000
UT	13.6%	283,200	39,000
National Totals		17,371,900	5,557,000

CDC's Tobacco Control Goals

Make tobacco use a minor public health nuisance

- ❑ Prevent initiation among the young**
- ❑ Promote quitting**
- ❑ Eliminate secondhand smoke exposure**
- ❑ Identify and eliminate tobacco-related population disparities**

CDC Office on Smoking and Health (OSH): Mandates, Roles and Responsibilities

❑ National Tobacco Control Program

- 80% of Core funding supports comprehensive programs
- 50 states, DC, 8 territories, 8 tribes, 6 national networks
- Technical assistance, guidance and support

❑ National and Global Surveillance

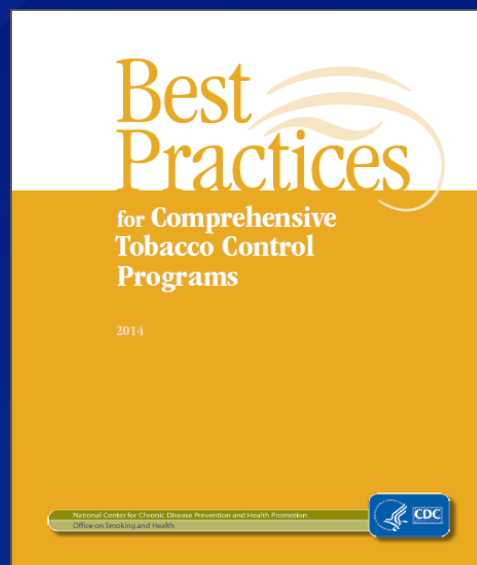
- NYTS, NATS, BRFS, YRBS, GTSS

❑ Health Communications Support

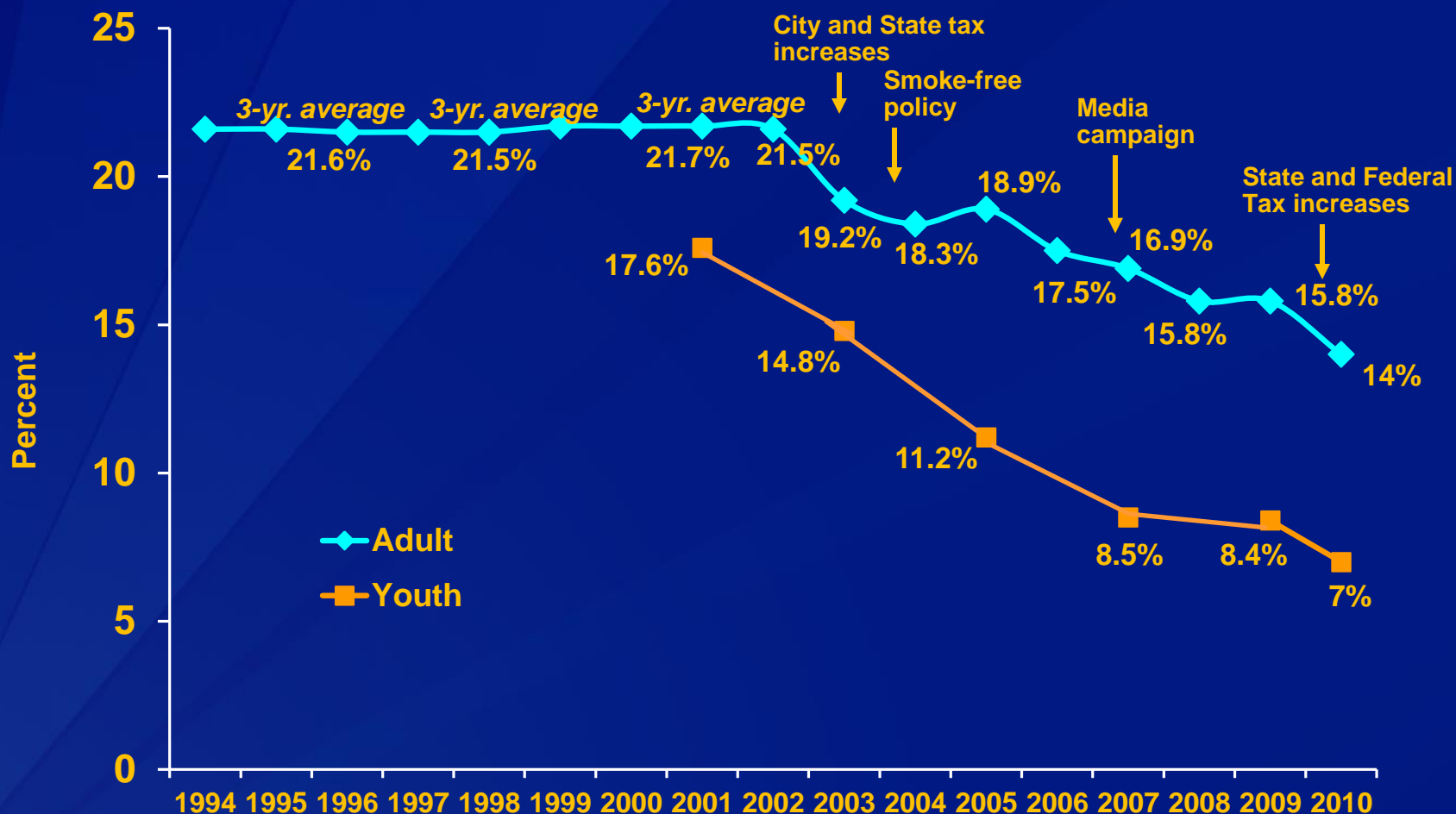
- ❑ TIPS
- ❑ Earned media direct and state support

Evidence-Based Interventions

- ❑ Sustained funding of comprehensive programs
- ❑ Price increases
- ❑ 100% smoke-free policies
- ❑ Hard-hitting media campaigns
- ❑ Cessation access



Immediate impact of a comprehensive approach: youth and adult smoking rates in NYC

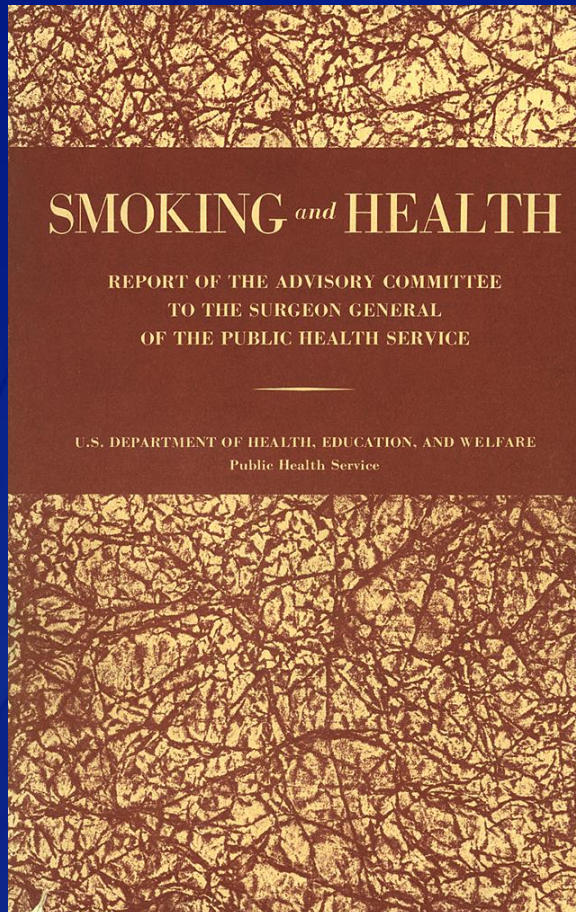


Source: BRFSS 1993 – 2001; NYC Community Health Survey 2002 – 2010; and NYC YRBS 2001 - 2010

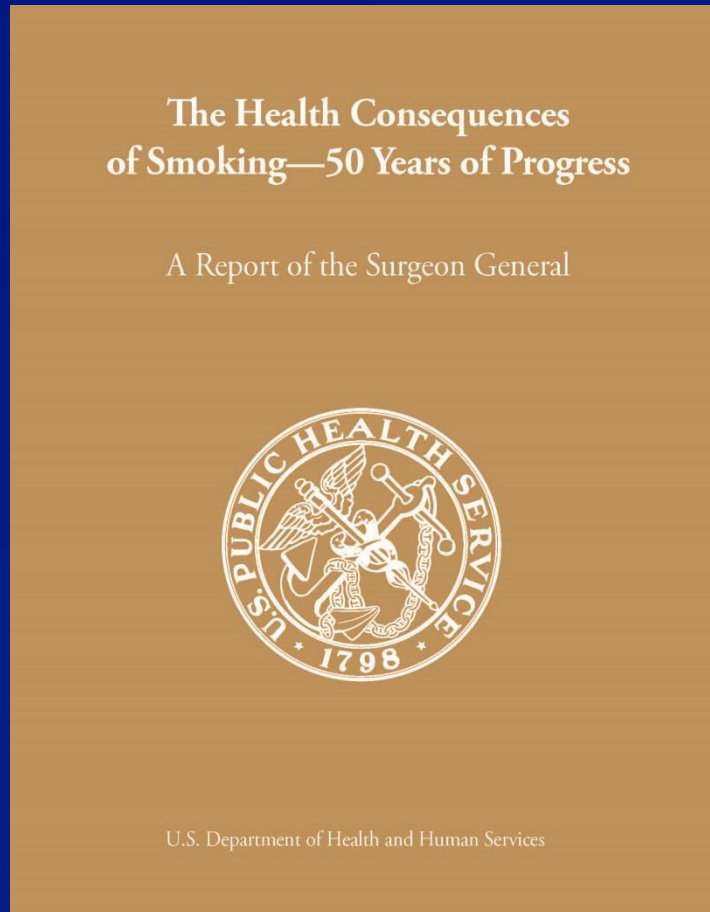
**Unprecedented
Time
for
Tobacco Prevention
Coalition Work**

The Health Consequences of Smoking: 50 Years of Progress

A Report of the Surgeon General



1964



2014

Key Findings

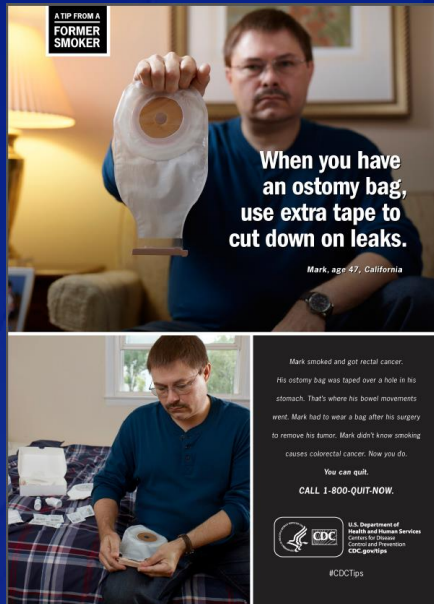
- ❑ **“The burden of death and disease from tobacco use in the US is overwhelmingly caused by cigarettes and other combustible products; rapid elimination of their use will dramatically reduce this burden.”**
- ❑ **“Although cigarette smoking has declined significantly since 1964, very large disparities in tobacco use remain across groups.”**

2014 SGR: Comprehensive Tobacco Control Programs

Chapter 14, Conclusion 7 (p. 827):

“The evidence is sufficient to conclude that mass media campaigns, comprehensive community programs, and comprehensive statewide tobacco control programs prevent initiation of tobacco use and reduce the prevalence of tobacco use among youth and adults.”

Tips From Former Smokers Campaign



Leverage the Comprehensive National Education Campaigns

1. Tips from Former Smokers (Adults)
2. The Real Cost of Smoking (Preteens and Teens)
3. Truth- Finish It (Teens and Young Adults)

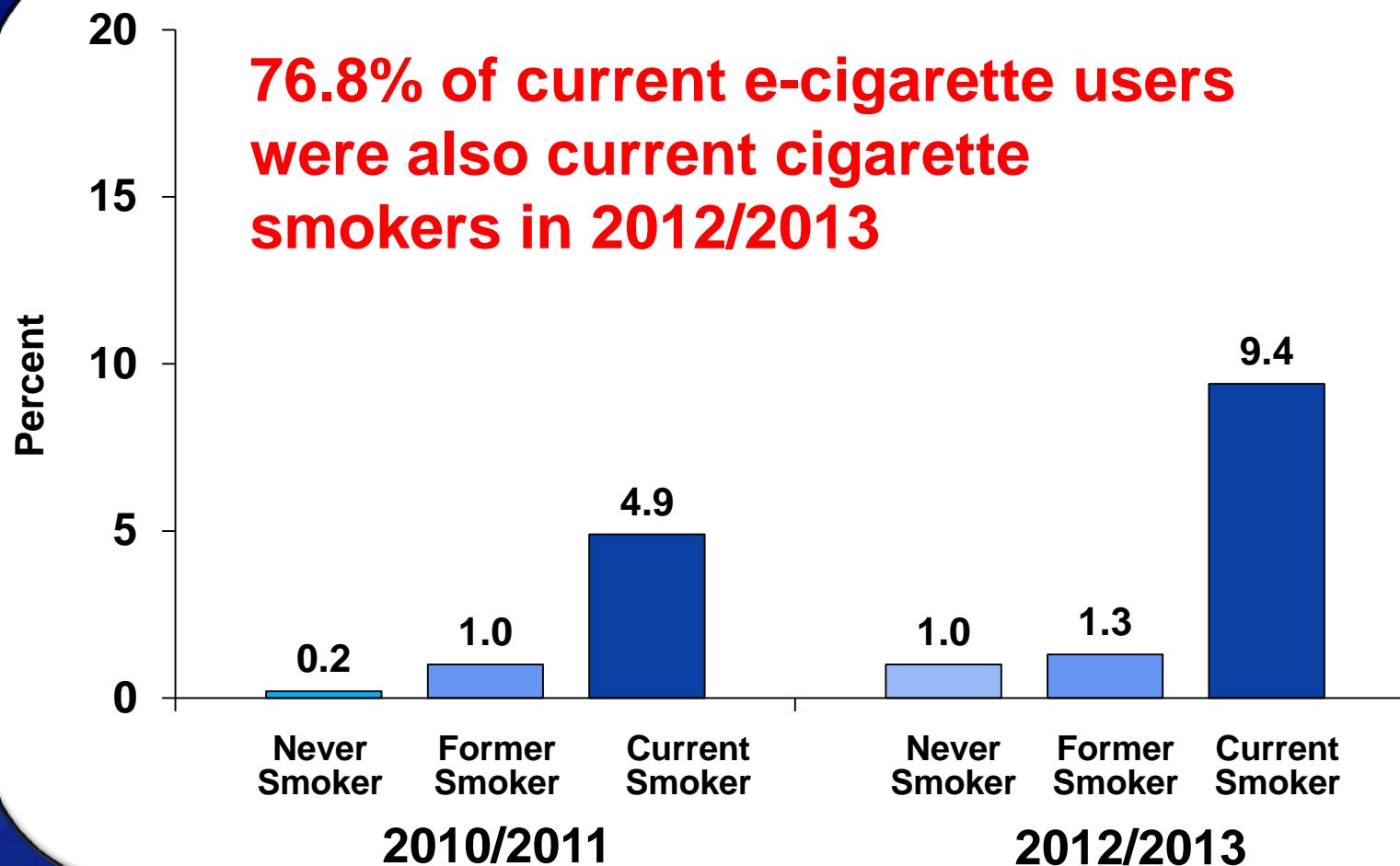


What You Can Do Through Your Coalitions

- ❑ **Tried & True Tobacco Prevention and Cessation**
 - Media campaigns
 - Tax increases
 - Clean indoor air policies
 - Cessation policies
- ❑ **Comprehensive tobacco control programs**
- ❑ **Special effort to reach vulnerable populations**
- ❑ **Consider “end game” strategies**



Past 30 day use of e-cigarettes among U.S. adults, by cigarette smoking status – Styles, 2010/2011 & 2012/2013



“Cutting Back” is Not Enough Even a Few Cigarettes Per Day is Dangerous

Risks for dual users of cigarettes and e-cigarettes:

- ❑ Smoking just 1-4 cigarettes a day doubles the risk of dying from heart disease.
- ❑ Heavy smokers who reduce their cigarette use by half still have a very high risk for early death.

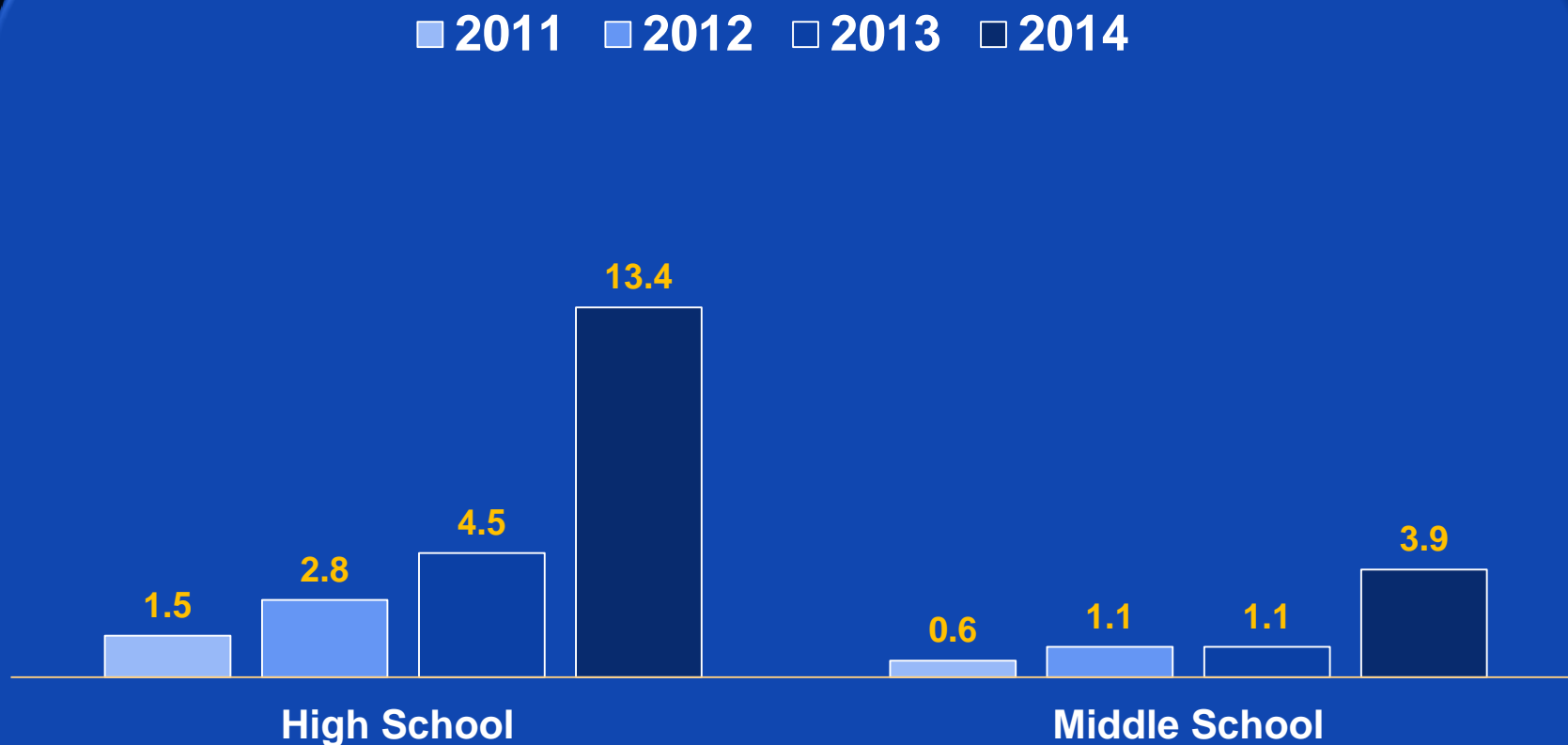
Benefits of quitting smoking completely:

- ❑ Heart disease risk is cut in half 1 year after quitting and continues to drop over time.
- ❑ Even quitting at age 50 cuts your risk in half for early death from a smoking-related disease.

Sources: Bjartveit K, Tverdal A. [Health Consequences of Smoking 1-4 Cigarettes per Day](#). Tobacco Control 2005; 14(5):315-20.

Tverdal A, Bjartveit K. [Health Consequences of Reduced Daily Cigarette Consumption](#). Tobacco Control. 2006; 15(6): 472–80.

Current (Past 30 Day) Use of E-cigarettes among U.S. Middle and High School Students, 2011-2014



Source: Centers for Disease Control and Prevention & U.S. Food and Drug Administration. National Youth Tobacco Survey.



In 2013, more than
a quarter million
middle and high
school students
never smoked
regular cigarettes
but **had** used
e-cigarettes...

3 times
as many as 2011!



Nicotine Poses Unique Dangers to the Developing Human

- ❑ Youth use of nicotine in any form is unsafe.
- ❑ Nicotine is highly addictive.
- ❑ Nicotine is toxic to developing fetuses and impairs fetal brain and lung development.
- ❑ Because the adolescent brain is still developing, nicotine use during adolescence can disrupt the formation of brain circuits that control attention, learning, and susceptibility to addiction.
- ❑ Poisonings have resulted among users and non-users due to ingestion of nicotine liquid, absorption through the skin, and inhalation.

Key Take Away Points



Summary

- ✓ ENDS are unregulated and are not an FDA-approved quit aid.
- ✓ Youth and adult ENDS use is increasing rapidly.
- ✓ Youth use of nicotine or tobacco in any form is dangerous.
- ✓ Adults must quit smoking cigarettes completely to realize potential benefits of ENDS.

Policy Approaches

- ✓ No marketing or sales to kids
- ✓ Clean air is the standard
- ✓ FDA regulation is important, but states shouldn't wait to act
- ✓ Pedal to the metal on combustible tobacco

Sales Restrictions: Local and State Product Bans

Other end game strategies which could involve greater restrictions on sales, particularly at the local level, including bans on entire categories of tobacco products, could significantly alter the strategic environment for tobacco control.”

—2014 Surgeon General's Report

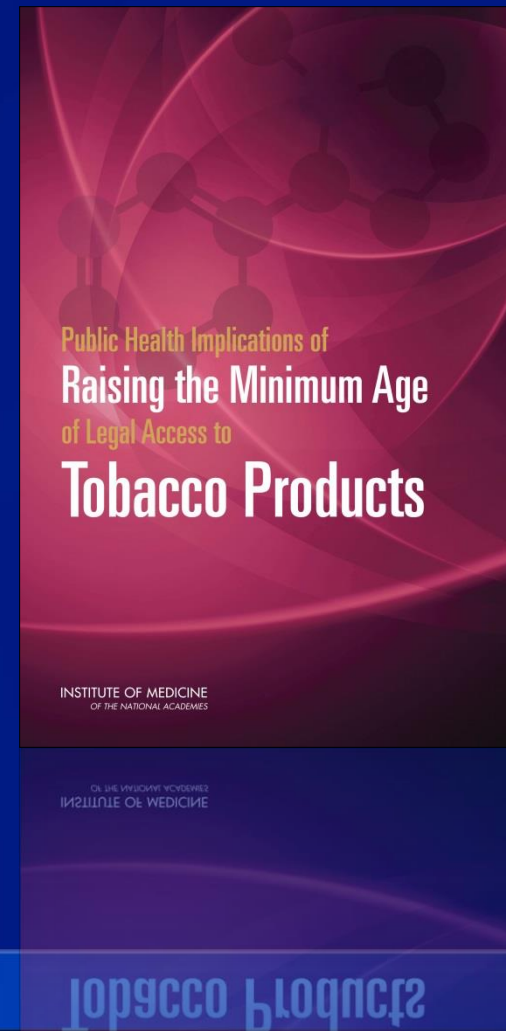
Communities with Sales Restrictions

- ❑ **Prohibit sale in certain retailers**
 - San Francisco
 - 40 % of Massachusetts
- ❑ **Prohibit sale within a certain distance of venues**
 - Chicago (1,000 feet of parks and schools)
- ❑ **Prohibit the sale of certain products**
 - New York and Providence
- ❑ **Increase age of purchase**
 - Hawaii 1st State

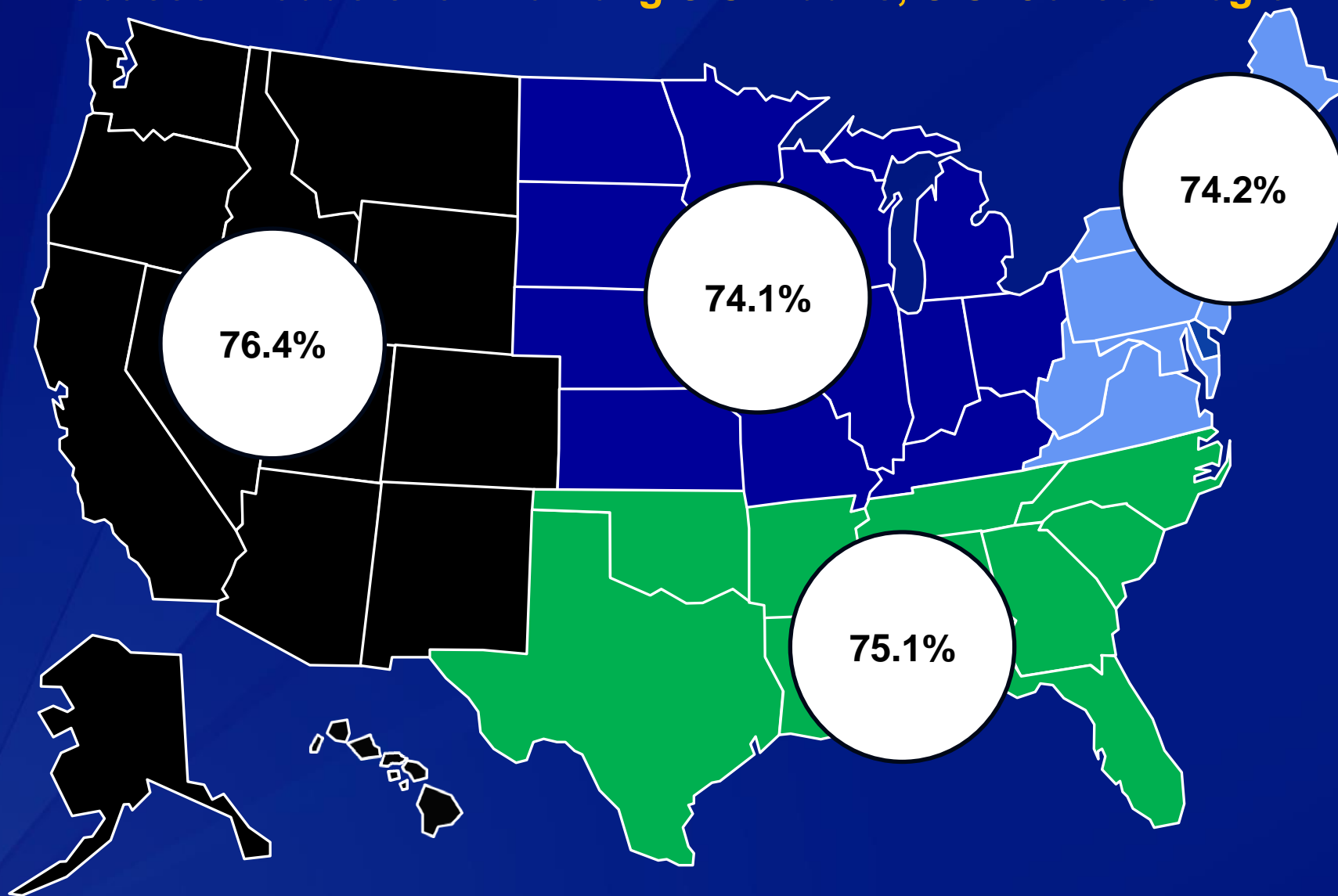


Reducing Minors Access and Use of Tobacco Products through Product and Sales Restrictions: Raising the Age to 21

- ❑ **Prevent or delay initiation of tobacco use by adolescents and young adults**
 - 12% decrease in prevalence by the time today's teenagers are adults
 - 223,000 fewer premature deaths
 - 50,000 fewer deaths from lung cancer
 - 4.2 million fewer years of life lost for those born between 2000 and 2019



Favorability toward Raising the Legal Minimum Age to Purchase All Tobacco Products to 21 among U.S. Adults, U.S. Census Region



No statistically significant difference observed between regions.

National Networks Addressing Tobacco-Related and Cancer Disparities



- CADCA- Geographic Health Equity Alliance
- LGBT HealthLink
- National African American Tobacco Prevention Network
- National Behavioral health Network for Tobacco and Cancer Control
- National Native Network
- Nuestras Voces Network
- RAISE Network
- SelfMade Health Network

More Partnership More Collective Impact



Karla S. Sneegas, MPH

ksneegas@cdc.gov

770.488.5218

For more information please contact Centers for Disease Control and Prevention

1600 Clifton Road NE, Atlanta, GA 30333

Telephone, 1-800-CDC-INFO (232-4636)/TTY: 1-888-232-6348

E-mail: cdcinfo@cdc.gov Web: www.cdc.gov

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

